

CERTIFICATE OF MAILING
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Signature: _____

Name: _____

In re Application of Goldman et al.

Application Number 09/282,239

Filed March 31, 1999

For A METHOD FOR ISOLATING AND PURIFYING OLIGODENDROCYTES AND OLIGODENDROCYTE PROGENITOR CELLS

Group Art Unit 1652

Examiner R. Hutson

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

- | | |
|---|------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130) | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490) | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110) | \$ <u>555.00</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350) | \$ _____ |

- ☒ Applicant claims small entity status.
- ☐ A check to cover the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 141138. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.

_____ /Michael L. Goldman/ Signature	_____ September 10, 2009 Date
_____ Michael L. Goldman Typed or printed name	_____ (585) 263-1304 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 form is submitted.